



# County of San Bernardino Department of Behavioral Health

## INFORMATION NOTICE 10-04

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**Date:** February 11, 2010

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**To:** Department of Behavioral Health (DBH) Alcohol and Drug Services (ADS) and  
ADS Contract Agencies

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**From:** Allan Rawland, MSW, ACSW, Director

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**Subject:** Certification of Alcohol and Other Drug (AOD) Counselors

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**Introduction** Effective April 1, 2010, at least thirty percent (30%) of staff providing counseling services in all AOD Programs shall be licensed or certified pursuant to Title 9, Section 13010 of the CA Code of Regulations (CCR) and all other counseling staff shall be registered pursuant to Section 13035.

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**Background** As of April 1, 2005, regulations allowed AOD counselors who were then currently employed five years to become certified with one of the counselor certifying organizations designated in Title 9, CCR, § 13035. The requirement regarding registration and certification is applicable to staff providing counseling services. Registrants were required to complete certification within five years of registration with enforcement commencing April 1, 2010.

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**Implementation** Beginning April 1, 2010, DBH shall include in its annual audit review the certification and registration requirements for Title 9 of the CA Code of Regulations to ensure compliance.

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**Staff Master** AOD Counselors shall enter the registration or certification information in the DBH Staff Master to assist in determining compliance.

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**Non-Compliance** Registrants who fail to obtain certification within the said five years shall be prohibited from being an AOD Counselor at an AOD Program licensed or certified by the CA Department of Alcohol and Drug Programs (ADP).

Any AOD Program licensed or certified with ADP that permits the following:

- an individual to provide counseling services as an AOD Counselor that is not a licensed professional or certified AOD Counselor or
- a registrant to exceed the five year time limit for certification

shall be considered noncompliant and will receive a deficiency citation from ADP.

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**Questions** Questions regarding this Information Notice may be directed to DBH ADS Administration at (909) 382-3086.

# County of San Bernardino

## Department of Behavioral Health

### Job Aid: DBH Staff Master

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|------------------------------------|--|
| <b>Purpose</b>                     | This Job Aid will assist members of the DBH workforce including contract agency employees, DBH staff and interns in completing the Staff Master Worksheet for initial entries or updates.  |
| <b>Staff Providers Requirement</b> | Staff required to obtain a SIMON number includes the following: clinical providers, alcohol and drug counselors, physicians and psychiatrists and staff completing Medi-Cal Administrative Activity (MAA) billing.   |
| <b>Initial Entry</b>               | <p>In order to obtain a SIMON number for billing entry, members of the DBH workforce are required to complete a Staff Master worksheet.</p> <p>When initially requesting a SIMON number, access the Staff Master Worksheet:</p> <p><a href="http://www.sbcounty.gov/dbh/ContactProviders/Staff_Master/InSyst_Staff_Master_Submit_Form.html">http://www.sbcounty.gov/dbh/ContactProviders/Staff_Master/InSyst_Staff_Master_Submit_Form.html</a></p>   |
| <b>Updates</b>                     | <p>When updating the Staff Master, access the Staff Master Worksheet Update:</p> <p><a href="http://www.sbcounty.gov/dbh/ContactProviders/Staff_Master/InSyst_Staff_Master_Submit_Form_02.html">http://www.sbcounty.gov/dbh/ContactProviders/Staff_Master/InSyst_Staff_Master_Submit_Form_02.html</a></p> <p>Updates to the Staff Master are required for the following reasons:</p> <ul style="list-style-type: none"><li>• Certification, licensure, registration or waiver renewals</li><li>• Certification, licensure, registration or waiver status changes</li><li>• Termination of DBH workforce to stop billing privileges</li><li>• Name changes</li><li>• Discipline changes</li><li>• Medicare provider status changes</li></ul> <p><b>Note:</b> Failure to provide required changes may result in suspension of billing privileges which may affect revenue.</p> |
| <b>Staff Master Field Entries</b>  | The following table indicates the fields that must be completed by section for initial Staff Master entries or updates:  |

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**County of San Bernardino  
Department of Behavioral Health**

**Job Aid: DBH Staff Master, Continued**

**Staff Master Field Entries (continued)**

| <b>Field</b>                       | <b>Definition</b>  | <b>Required or Optional</b>   |
|------------------------------------|--|---|
| SIMON                              | SIMON billing number (only needed for Staff Master updates)  | Required  |
| First Name                         | First name of the employee   | Required  |
| MI                                 | Middle initial of the employee   | Optional  |
| Last Name                          | Last name of the employee  | Required  |
| Employee ID #                      | County employee identification number<br>Non-County employee enter "N/A" (only needed for Staff Master updates)              | Required  |
| Termination Date                   | Date the employee terminated (only needed for Staff Master updates)  | Required, if applicable   |
| Phone                              | Telephone number for the employee including area code, telephone number and extension (only needed for Staff Master updates) | Required  |
| Date of Birth                      | Day, month and year employee was born (only needed for initial entries)  | Required  |
| Gender                             | Gender of the employee, M/F (only needed for initial entries)  | Required  |
| National Provider Identifier (NPI) | Ten digit number assigned by National Plan & Provider Enumeration System (NPPES)   | Required for staff providing services to clients.<br>Not required for non-service provider staff. |
| Ethnicity                          | Ethnicity and cultural background of the employee. May select multiple selections (only needed for initial entries).         | Required for staff providing services to clients.<br>Not required for non-service provider staff  |

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# County of San Bernardino Department of Behavioral Health

## Job Aid: DBH Staff Master, Continued

### Staff Master Field Entries (continued)

| Field     | Definition  | Required or Optional  |
|-----------|---|---|
| Languages | Languages that the employee speaks or writes. May select multiple selections (only needed for initial entries). | Required for staff providing services to clients.<br>Not required for non-service provider staff. |

### License Information

| Field           | Definition  | Required or Optional |
|-----------------|---|----------------------|
| License Status  | <u>Pre-licensed/Registered</u> : for pre-licensed staff, interns, registered ADS Counselors and out of state Licensed Marriage and Family Therapists (LMFT) and Licensed Clinical Social Workers (LCSW)<br><u>Licensed/Certified/Waivered</u> : for licensed staff, certified ADS Counselors, waived psychologists and out of state waived providers<br><u>Not Applicable</u> : for non-licensed, non-certified, non-registered or non-waivered staff | Required             |
| License #       | License issued by appropriate CA Board<br>Waivered employees shall enter the word "waiver" in this field  | Required             |
| Certification # | Certification or registration number issued by the appropriate CA Board   |                      |
| State           | State that issued the license, certification, registration or waiver  | Required             |
| Renewal Date    | Date that the valid license, certification, registration or waiver will expire  | Required             |

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# County of San Bernardino Department of Behavioral Health

## Job Aid: DBH Staff Master, Continued

### Staff Master Field Entries (continued)

| Field                   | Definition   | Required or Optional |
|-------------------------|--|----------------------|
| Professional Discipline | <p><u>Educator</u>: not applicable</p> <p><u>Medical Records</u>: RHIA, RHIT, CPC, CCS</p> <p><u>MFCC</u>: Licensed Marriage and Family Therapist</p> <p><u>MFCC Intern</u>: Master's level MFT interns registered with BBS, out of state LMFTs</p> <p><u>Nurse</u>: Registered Nurse, Mental Health Registered Nurse</p> <p><u>Occupational Therapist</u>: OT</p> <p><u>OT Intern</u>: Occupational Therapist intern</p> <p><u>Other Licensed Worker</u>: Licensed Vocational Nurses</p> <p><u>Pharmacist</u>: not applicable</p> <p><u>Psychiatrist</u>: Physician with Psychiatry specialty</p> <p><u>Physician</u>: Medical Doctor</p> <p><u>Psychologist</u>: Licensed PhD or PsyD</p> <p><u>Psychologist Intern</u>: waived PhD or PsyD, interns or out of state psychologists</p> <p><u>Psych Tech</u>: Licensed psychiatric technicians</p> <p><u>Rehab Counselor</u>: ADS or AOD Counselor</p> <p><u>Social Worker</u>: Licensed Clinical Social Worker</p> <p><u>Social Worker Intern</u>: Master's level SW interns, associate social workers, out of state LCSW</p> <p><u>Unlicensed Workers</u>: Social Worker II, Mental Health Specialist, Peer and Family Advocates, staff doing MAA billing, other unlicensed providers</p> | Required             |

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# County of San Bernardino Department of Behavioral Health

## Job Aid: DBH Staff Master, Continued

Staff Master Field Entries (continued)

### Medicare Required Information:

| Field                                    | Definition   | Required or Optional                             |
|--|--|--|
| Will you be providing Medicare services? | <u>Yes</u> , if you are a Medicare eligible provider: LCSW, PhD, Physician, Psychiatrist<br><u>No</u> , for all other disciplines. | Required   |
| Birth Location: County                   | County where employee was born   | Required if you are a Medicare eligible provider |
| Birth State                              | State where employee was born  | Required if you are a Medicare eligible provider |
| Birth Country                            | Country where employee was born  | Required if you are a Medicare eligible provider |
| University attended                      | University employee attended to obtain last degree   | Required if you are a Medicare eligible provider |
| Degree type                              | Type of degree obtained  | Required if you are a Medicare eligible provider |
| Date Degree Earned                       | Month and year the degree was obtained   | Required if you are a Medicare eligible provider |

### Departmental Information (only needed for initial Staff Master entry)

|                |   |          |
|----------------|---|----------|
| Environment    | <u>ADS</u> : Alcohol and Drug Services<br><u>MH</u> : Mental Health<br><u>FFS</u> : Fee For Service | Required |
| Position/Title | Position and title of employee  | Required |
| Employee ID #  | County employee identification number<br>Non-County employee enter "N/A"                            | Required |
| Start Date     | Employee start date   | Required |

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# County of San Bernardino

## Department of Behavioral Health

### Job Aid: DBH Staff Master, Continued

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#### Staff Master Field Entries (continued)

| Field                  | Definition  | Required or Optional |
|------------------------|---|----------------------|
| Status                 | Regular: employees of DBH<br>Contract: DBH contract and Fee For Service providers<br>Temp: employees with temporary status for a limited term | Required             |
| Supervisor             | Person that will directly supervise the employee  | Required             |
| Phone                  | Telephone number for the employee including area code, telephone number and extension   | Required             |
| Fax                    | Facsimile number for the employee including area code, telephone number and extension   | Required             |
| Primary Reporting Unit | Primary RU which the employee will provide services   | Required             |
| Other RU's             | Other RUs which the employee will provide services  | Required             |

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#### Questions

Questions regarding the entry of information in the Staff Master may be directed to Dionne Allen, Staff Analyst II, at (909) 382-3195 or [Compliance\\_Questions@dbh.sbcounty.gov](mailto:Compliance_Questions@dbh.sbcounty.gov).

Members of the DBH workforce may contact DBH Information Technology at (909) 884-4884 or [isdhelpdesk@isd.sbcounty.gov](mailto:isdhelpdesk@isd.sbcounty.gov) regarding verification of information entered in the Staff Master or to report problems with data entry into the Staff Master.

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